

St Helena Hospice

Registered charity number 280919

2009 Patient Survey Results

Community Services

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Date: 31 July 2009

Version: Final 1.0



Introduction

The 2009 survey was carried out during April, May and June 2009. The approach taken was the same as last year's survey with patients given the forms at home and pre-paid envelopes provided to ensure that the forms were treated confidentially. The envelopes were addressed to the Partnership Group thus making the survey completely independent of the hospice management.

The question set is very similar to last year's survey. Some questions were slightly rephrased to make them clearer and the sequence of some questions was changed to make them flow more logically.

The overall results are very positive and reflect the excellent service provided by the Community team. There are some lovely comments that reflect the high esteem in which this service is held by the patients but it is disappointing when patients give a low score to a service yet do not provide any suggestions about how it could be improved.

The following is an exact summary of patients' views on each question. Additional comments are shown in "*quotation marks and italics*". Any explanatory comments from the author are clearly differentiated as 'Notes'.

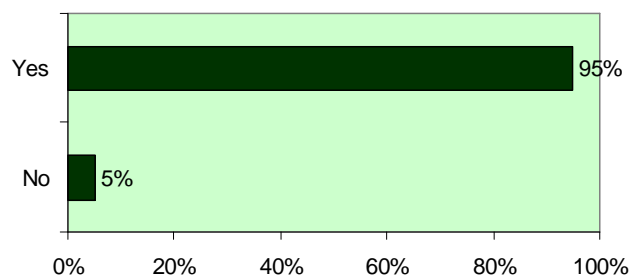
The Partnership Group would like to thank the Community Services team for their help with this survey.

Results

There were **21** responses from Community Services patients.

Q1 Do you feel your referral to the hospice was at an appropriate time in your illness?

| | |
|-----|----------|
| Yes | 20 (95%) |
| No | 1 (5%) |



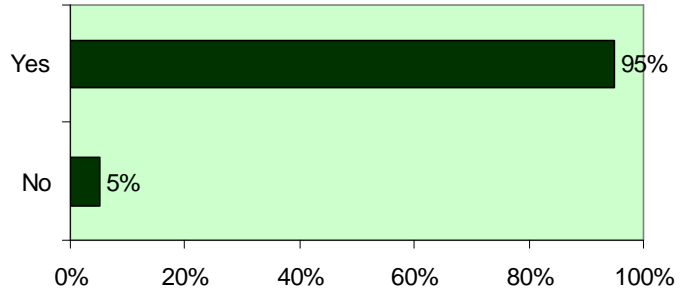
Comments:

"Well I was quite unwell, it was right to go."

"No, it would have been useful to have been referred on discharge from hospital ward."

Q2 Were you satisfied with the time between initial contact and the first visit?

Yes 20 (95%)
No 1 (5%)



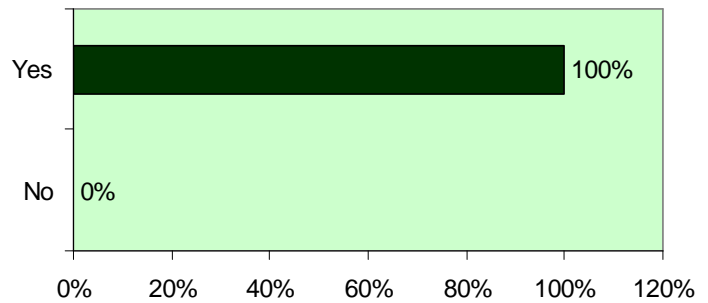
Comments:

“First visit gave me more confidence. I knew I had help at hand when needed. Thank you.”

“In the circumstances a visit the day after leaving hospital would have been better. It was 5 days after.”

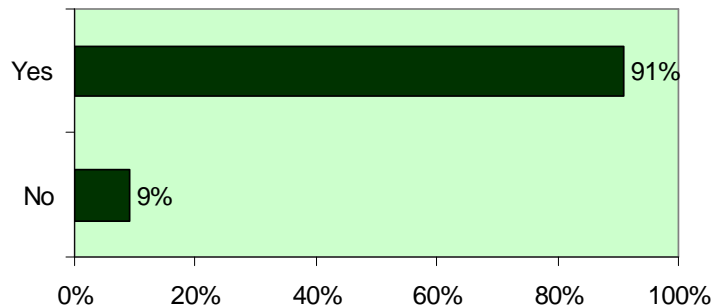
Q3 Was the frequency of subsequent visits negotiated with you?

Yes 21 (100%)
No 0



Q4. Was the interval between visits acceptable?

Yes 19 (91%)
No 2 (9%)



Comments:

“I didn’t mind at all.”

“Great”

Q5 Please tick each of the following hospice professionals that have visited you.

| Visitor | ✓ | Average marks out of 10 |
|--|-----------|-------------------------|
| Community specialist nurse (Macmillan nurse) | 19 | 9.7 |
| Hospice-at-Home nurse | 5 | 10 |
| Family support worker (i.e. hospice social worker/ counsellor) | 1 | 10 |
| Physiotherapist | 6 | 9.3 |
| Occupational therapist | 5 | 9.8 |
| Chaplain | 1 | 10 |
| Hospice doctor | 3 | 9.6 |
| Complementary therapist | 1 | 7 |
| Art therapist | 1 | 6 |
| Music therapist | 1 | 4 |
| Others: | | |

Q5a Specific comments about these services:

“Family Support Worker – not very helpful, only went once.”

“None, they’re all good”

“Extremely beneficial with regard to medical and emotional support.”

“Thank you for providing me with a caring and considerate Macmillan nurse.”

“Fantastic support all round. Thank you all.”

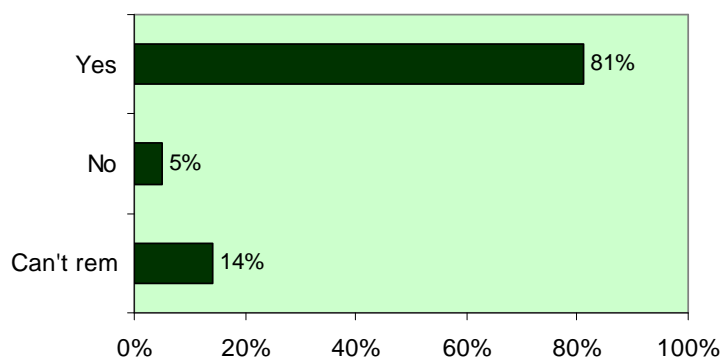
“Hospice doctor and Macmillan nurse gave more information about illness and developments.”

“All excellent.”

“(Mac nurse) is always very sensitive, supportive and helpful. She is a friend.”

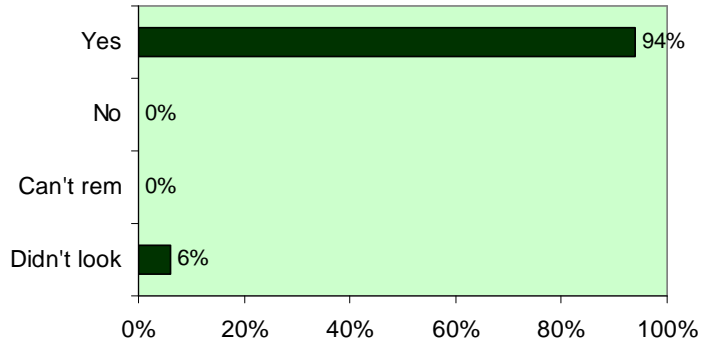
Q6a Were you given the Patient Information Guide?

| | |
|----------------|----------|
| Yes | 17 (81%) |
| No | 1 (5%) |
| Can't remember | 3 (14%) |



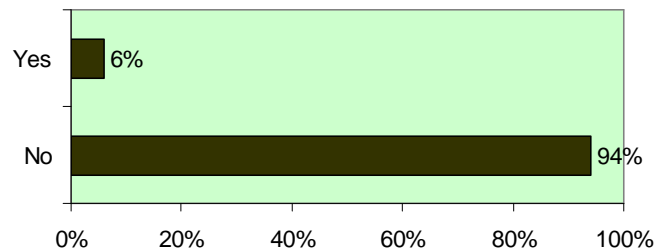
Q6b Was the information helpful?

| | |
|-----------------------------|----------|
| Yes | 16 (94%) |
| No | 0 |
| Can't remember | 0 |
| Did not look at the booklet | 1 (6%) |



Q6c Would you have preferred the information in another format? (eg. large print, audio, colour, other language)

| | |
|-----|----------|
| Yes | 1* (6%) |
| No | 16 (94%) |



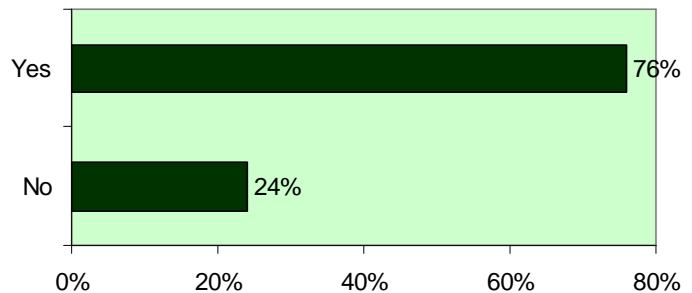
*Note: Unfortunately there was no comment to suggest what the patient would have preferred.

Q7a Is there any other information that would have been useful?

No comments or suggestions received.

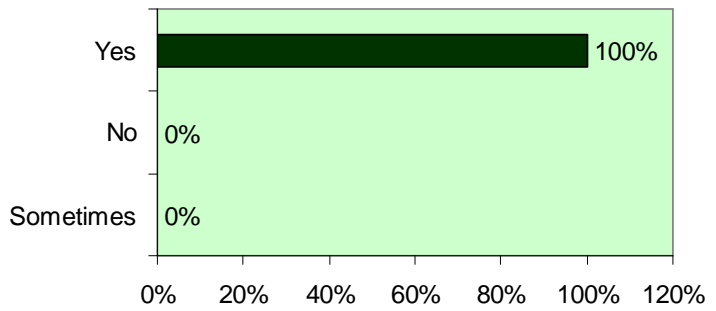
Q7b Are you aware that information is available in the hospice library for patients, family members and carers?

| | |
|-----|----------|
| Yes | 16 (76%) |
| No | 5 (24%) |



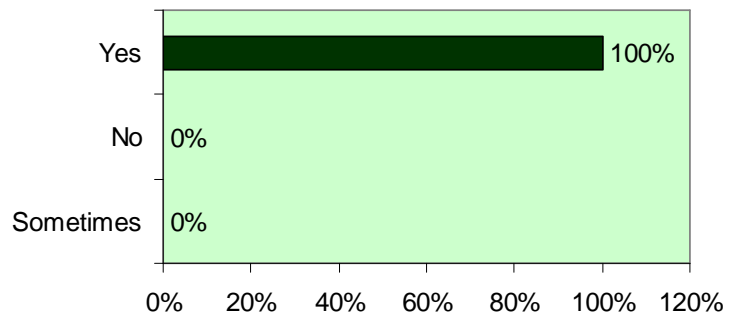
Q8 Do the hospice professionals introduce themselves on their first visit?

| | |
|-----------|-----------|
| Yes | 21 (100%) |
| No | 0 |
| Sometimes | 0 |



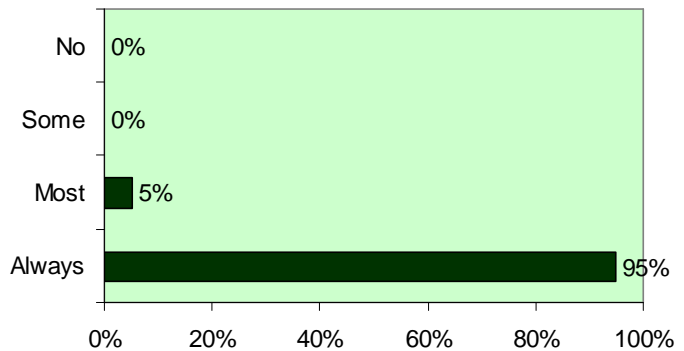
Q9 Do they explain their role?

| | |
|-----------|-----------|
| Yes | 21 (100%) |
| No | 0 |
| Sometimes | 0 |



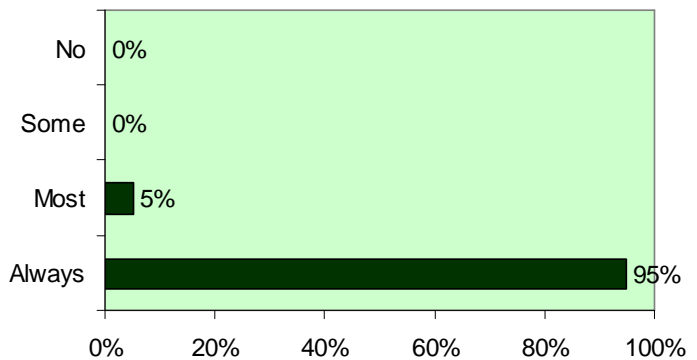
Q10 Are you treated with courtesy and respect by the hospice professionals?

| | |
|------------------|----------|
| No | 0 |
| Some of the time | 0 |
| Most of the time | 1 (5%) |
| Always | 20 (95%) |



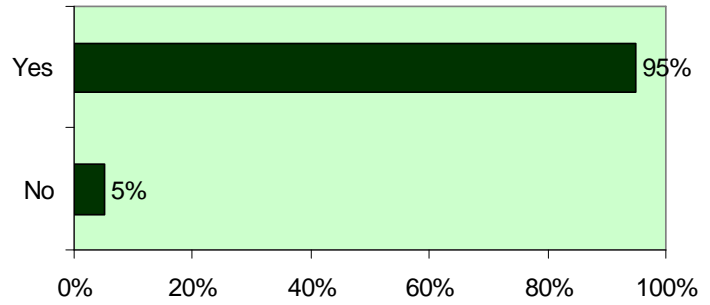
Q11 Do you feel they respect your privacy?

| | |
|------------------|----------|
| No | 0 |
| Some of the time | 0 |
| Most of the time | 1 (5%) |
| Always | 20 (95%) |



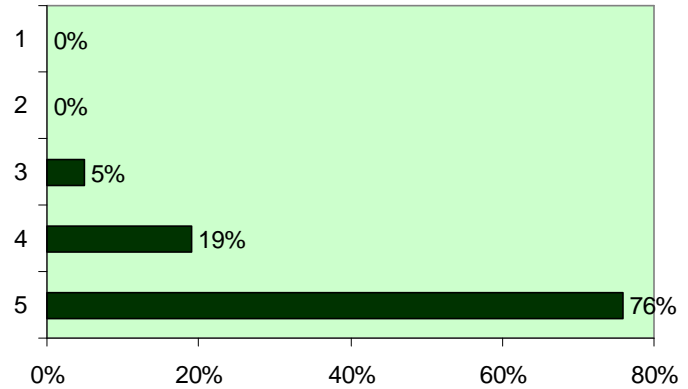
Q12 Are you satisfied that your personal and health details are handled confidentially?

Yes 20 (95%)
 No 1 (5%)



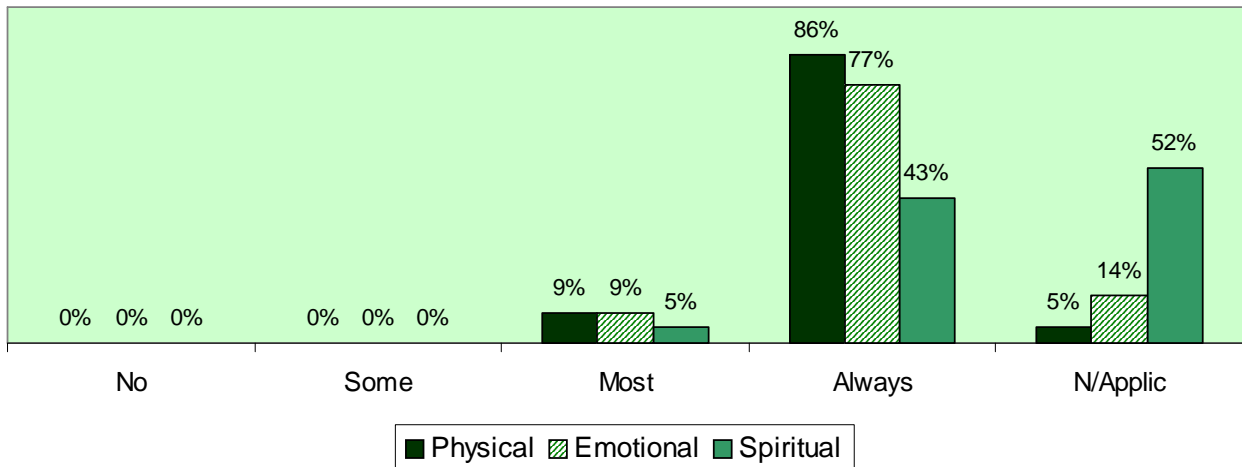
Q13 How involved do you feel in the planning of your care or treatment? (1 = not involved, 5 = fully involved)

1 0
 2 0
 3 1 (5%)
 4 4 (19%)
 5 16 (76%)



Q14 Do you feel the staff make an effort to meet your individual physical, emotional and spiritual needs and wishes?

| | Physical | Emotional | Spiritual |
|------------------|----------|-----------|-----------|
| No | 0 | 0 | 0 |
| Some of the time | 0 | 0 | 0 |
| Most of the time | 2 (9%) | 2 (9%) | 1 (5%) |
| Always | 18 (86%) | 16 (77%) | 9 (43%) |
| Not Applicable | 1 (5%) | 3 (14%) | 11 (52%) |



Comments:

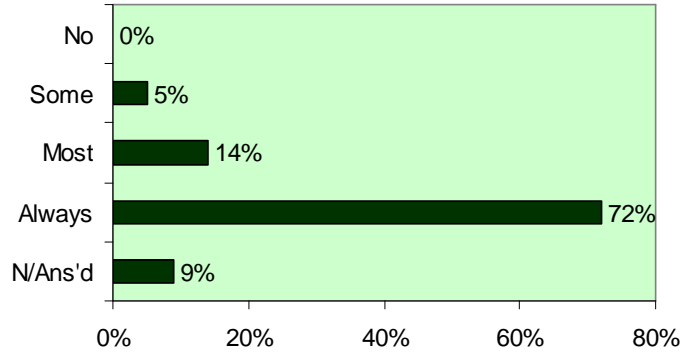
"They are all wonderful what they do."

"Just a very good service. Thank you."

"Spiritual needs have not been required so far."

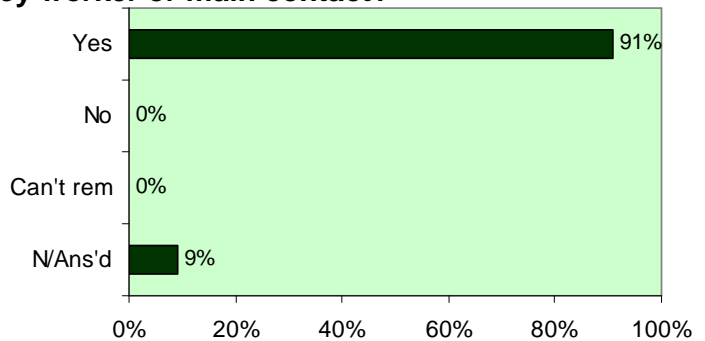
Q15 Are your preferences and requests taken into account?

| | |
|------------------|----------|
| No | 0 |
| Some of the time | 1 (5%) |
| Most | 3 (14%) |
| Always | 15 (72%) |
| Not Ans'd | 2 (9%) |



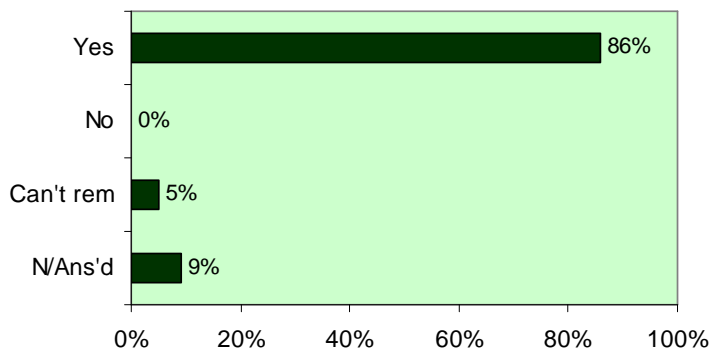
Q16 Were you told the name of your key worker or main contact?

| | |
|----------------|----------|
| Yes | 19 (91%) |
| No | 0 |
| Can't remember | 0 |
| N/Ans'd | 2 (9%) |



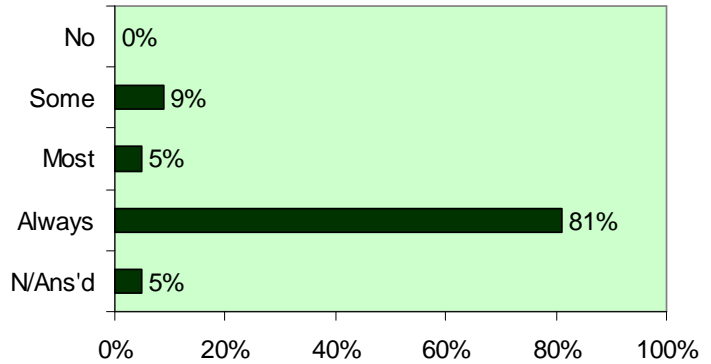
Q17 Were you told how to contact the service for 'out of hours' help or support?

| | |
|----------------|----------|
| Yes | 18 (86%) |
| No | 0 |
| Can't remember | 1 (5%) |
| N/Ans'd | 2 (9%) |



Q18 Do you feel that all the professionals involved in your care have communicated well with one another to provide co-ordinated care for you?

| | |
|------------------|----------|
| No | 0 |
| Some of the time | 2 (9%) |
| Most of the time | 1 (5%) |
| Always | 14 (81%) |
| N/Ans'd | 4 (5%) |



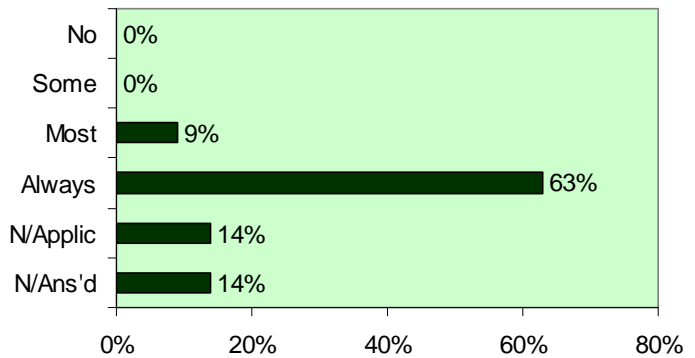
Comments:

"The problem we have had is that we keep getting transferred from one person to another."

"No knowledge regarding internal communications."

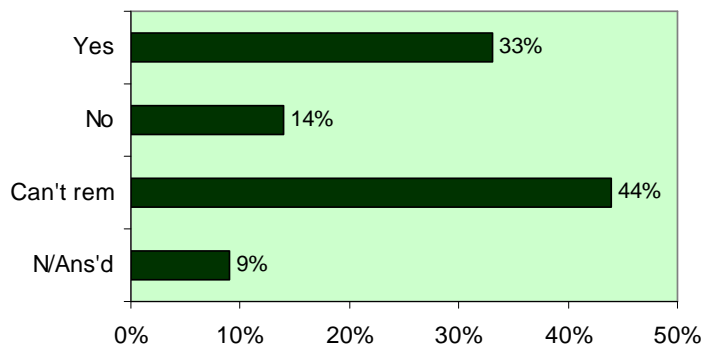
Q19 Has the service responded in a flexible way to meet your changing needs?

| | |
|------------------|----------|
| No | 0 |
| Some of the time | 0 |
| Most of the time | 2 (9%) |
| Always | 13 (63%) |
| Not Applic | 3 (14%) |
| N/Ans'd | 3 (14%) |



Q20 Were you told how to make a complaint if you needed to?

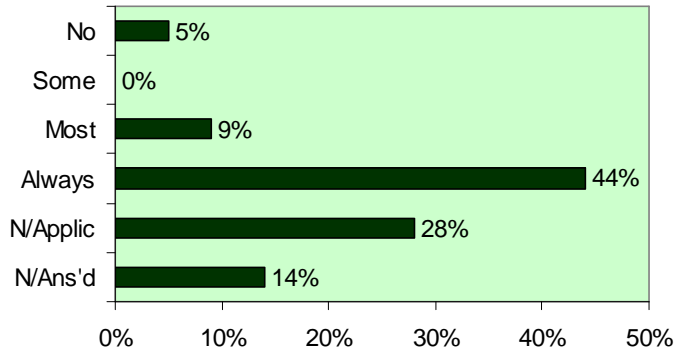
| | |
|----------------|---------|
| Yes | 7 (33%) |
| No | 3 (14%) |
| Can't remember | 9 (44%) |
| N/Ans'd | 2 (9%) |



Q21 If you received equipment to help maintain your independence:

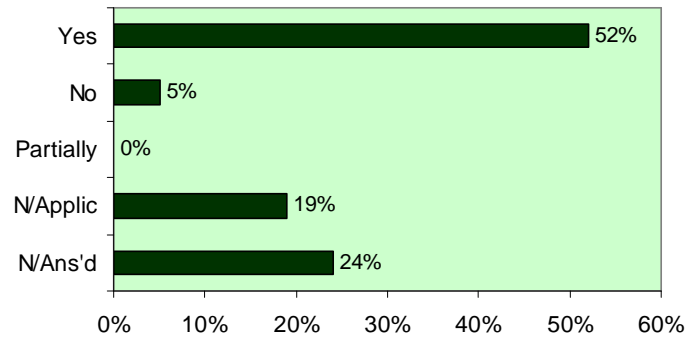
Q21a Was it provided in a timely manner?

| | |
|------------------|---------|
| No | 1 (5%) |
| Some of the time | 0 |
| Most of the time | 2 (9%) |
| Always | 9 (44%) |
| Not Applic | 6 (28%) |
| N/Ans'd | 3 (14%) |



Q21b Did it meet your needs?

| | |
|----------------|----------|
| Yes | 11 (52%) |
| No | 1 (5%) |
| Partially | 0 |
| Not Applicable | 4 (19%) |
| N/Ans'd | 5 (24%) |



Q22 Do you have any more comments or suggestions to help us improve our community services?

"No comments, service is good."

"The hospice staff have acted as an intermediary between oncologist and GP and improved treatment and peace of mind."

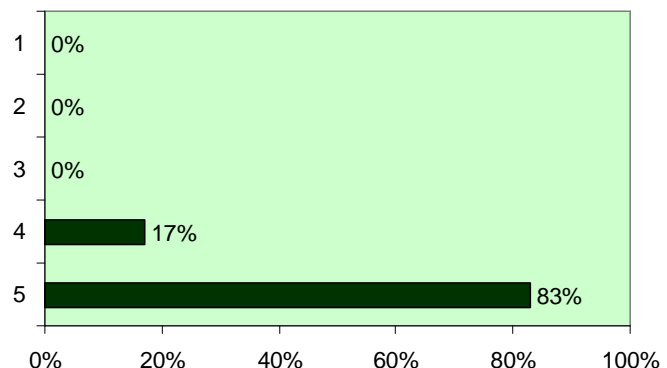
"You can't improve on perfection. The service is excellent. Thank you."

"Very good service."

18 family member(s) or carers completed the following questions:

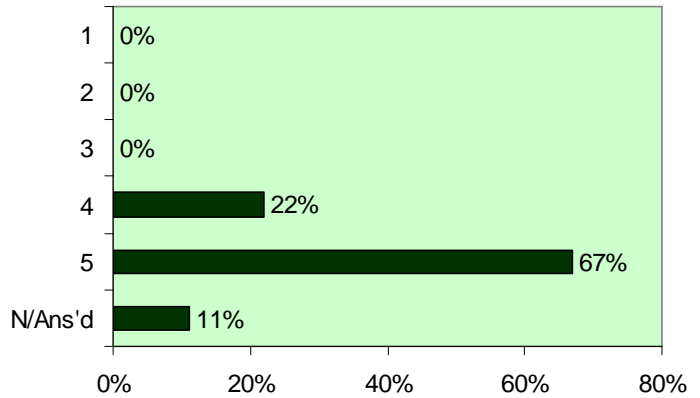
Q23. Do you feel that the hospice professionals acknowledged your situation and any concerns you have? (1 = not at all, 5 = fully)

| | |
|---|----------|
| 1 | 0 |
| 2 | 0 |
| 3 | 0 |
| 4 | 3 (17%) |
| 5 | 15 (83%) |



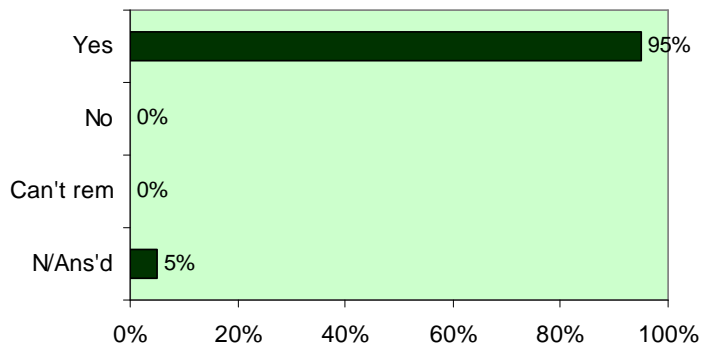
Q24. Are your issues or concerns adequately addressed? (1 = not at all, 5 = fully)

| | |
|---------|----------|
| 1 | 0 |
| 2 | 0 |
| 3 | 0 |
| 4 | 4 (22%) |
| 5 | 12 (67%) |
| N/Ans'd | 2 (11%) |



Q25. Have you been made aware of the support you could receive from the hospice for yourself?

| | |
|----------------|----------|
| Yes | 17 (95%) |
| No | 0 |
| Can't remember | 0 |
| N/Ans'd | 1 (5%) |



Q26. Are there any other comments you would like to add?

"No, the service so far has been excellent."

"Thank you for the help we have had so far from St Helena Hospice."